SUPPLEMENTARY MATERIAL

Supplementary Methods

Detailed search strategy

Embase.com

(('folinic acid'/exp AND fluorouracil/exp AND irinotecan/exp AND oxaliplatin/exp AND 'drug combination'/exp AND ('pancreas cancer'/de OR 'pancreas tumor'/de OR 'pancreas adenoma'/de OR 'pancreas adenocarcinoma'/de OR 'pancreas carcinoma'/de OR 'pancreas islet cell carcinoma'/de OR (pancrea* NEAR/3 (cancer* OR neoplas* OR tumo* OR adenocarcinom* OR carcinom* OR adenom*)):ab,ti)) OR (Folfirinox):ab,ti)

Medline (Ovid)

((Leucovorin/ AND fluorouracil/ AND irinotecan.mp. AND oxaliplatin.mp. AND Drug Combinations/ AND (exp Pancreatic Neoplasms/ OR (pancrea* ADJ3 (cancer* OR neoplas* OR tumo* OR adenocarcinom* OR carcinom* OR adenom*)).ab,ti.)) OR (Folfirinox).ab,ti.)

<u>Cochrane</u>

(Folfirinox):ab,ti

Web-of-science

TS=(Folfirinox)

<u>Scopus</u>

TITLE-ABS-KEY(Folfirinox)

Google scholar

Folfirinox

References Excluded studies after full text assessment, n=30

Only other regimen than FOLFIRINOX, n=10

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Language other than English, n=2

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Non-original studie, n=1

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Patients included in other studies, n=2

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Study [reference]	Clear aim	Re cruit ment	Accuratel y measured exposure	Accuratel y measured outcome	Confoundin g factors identified	Confoundin g factors accounted	Follow- up complet e enough	Follow- up long enoug h	Precise statistic al results presente d	Do you believe results	Ability to generali ze results	In accordanc e with existing evidence	Implications of study in practice
Paniccia et al. 2014[1]	Yes	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	No	Yes	No
Christians et al. 2014[2]	Yes	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	No	Yes	No
Katz et al. 2016[3]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Okada et al. 2016[4]	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes	Yes	No
Shaib et al. 2016[5]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Yoo et al. 2017[6]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No
Itchins et al. 2017[7]	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	No	Yes	No
Shrestha et al. 2017[8]	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No
Boone et al. 2013[9]	Yes	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	No
Ferrone et al. 2015[10]	Yes	Yes	Yes	No	No	No	Yes	No	Yes	No	No	No	No
Addeo et al. 2015[11]	Yes	Yes	Yes	No	Yes	No	Yes	Yes	No	Yes	No	Yes	Yes
Khushman et al. 2015[12]	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	No	No	No	No
Pietrasz et al. 2015[13]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No	No	No	Yes
Mellon et al. 2015[14]	Yes	Yes	No	No	No	No	Yes	Yes	Yes	Yes	No	Yes	No
Blazer et al. 2015[15]	Yes	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	No
Badiyan et al. 2016[16]	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes	Yes	No	Yes	No
Kim et al. 2016[17]	Yes	Yes	Yes	No	Yes	No	Yes	No	Yes	No	No	No	No
Vogel et al. 2017[18]	Yes	Yes	Yes	No	Yes	Yes	Yes	No	No	No	No	Yes	No
Grose et al. 2017[19]	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	No	Yes	No
Tinchon et al. 2013[20]	Yes	Yes	No	Yes	No	No	Yes	No	No	Yes	Yes	Yes	No
Peddi et al. 2012[21]	Yes	Yes	Yes	Yes	No	No	Yes	No	No	Yes	No	Yes	No
Mahaseth et al. 2013[22]	Yes	Yes	Yes	Yes	No	No	Yes	No	No	Yes	No	Yes	No
Moorcraft et al. 2014[23]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	No
Stein et al. 2016[24]	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes

Supplementary Table 1. Methodological quality assessment according to Critical Appraisal Skill Program (CASP).

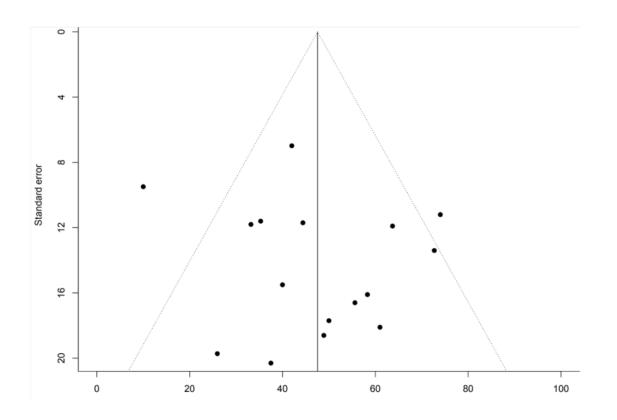
Supplementary Table 2. Survival outcomes reported for BRPC patients treated with neoadjuvant FOLFIRINOX.

Study [reference]*	No. of patients	Median follow-up*, months (IQR)	Median OS, months (95% Cl)	Median PFS, months (95% CI)
Paniccia et al. 2014 [1]	18	14.5 (10-17)	25.0	14.0
Katz et al. 2016 [3]	22	NR	21.7 (16-nr)	NR
Shaib et al. 2016 [5]	13	18.0	11.0 (6-nr)	5.7 (3-33)
Yoo et al. 2017 [6]	18	24.1 (14-32)	21.2 (14-28)	16.8 (9-24)
Itchins et al. 2017 [7]	14	34.8	25.9 (12-nr)	NR
Pietrasz et al. 2015 [13]	47	38.2 (29-47)†	nr	16.5†
Kim et al. 2016 [17]	19	41.4†	34.2†	21.3†

* Studies not shown in this table did not report survival outcomes for BRPC patients specifically, or did not report survival at all. NR = Not Reported. nr = not reached. IQR = interquartile range. CI = confidence interval. OS = overall survival. PFS = progression-free survival.

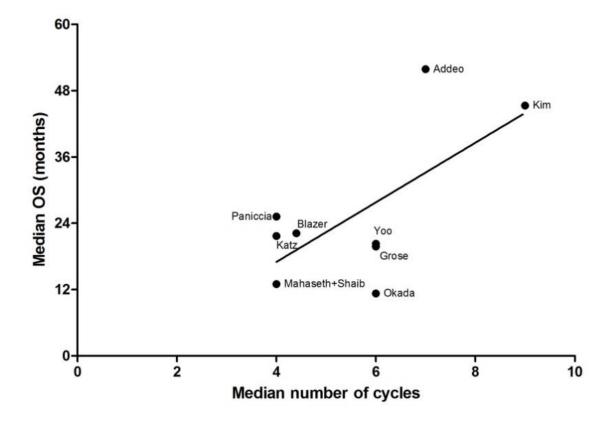
† Resected patients only.

Supplementary Figures



Supplementary Figure 1: Funnel plot of the 2-year OS of studies.

Kaplan-Meier analysis of patient-level OS was used for estimation of median study OS, including only BRPC patients. Three studies are not shown in this funnel plot as Peddi et al.[21] and Mellon et al.[14] included no patients surviving at least 2 years, and Addeo et al.[11] did not have a sufficient number of events to calculate the standard error. OS = overall survival. BRPC = borderline resectable pancreatic cancer



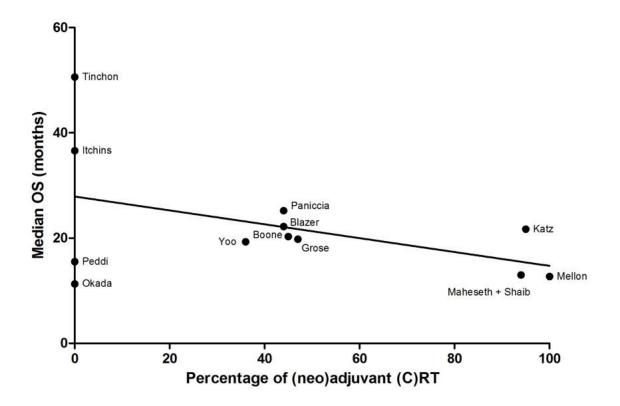
Supplementary Figure 2: Median number of administered neoadjuvant FOLFIRINOX cycles and median OS of studies. Kaplan-Meier analysis of patient-level OS was used for estimation of median study OS, including only BRPC patients. (p = 0.05). Linear regression analysis was performed. P-value was calculated using a two-sided F test. OS = overall survival. BRPC = borderline resectable pancreatic cancer.

Study	Events Total	Proportion 95%-Cl
G-CSF = No Christians Okada Khushman Peddi Moorcraft Random effects mode Heterogeneity: / ² = 10%, 4		0.11 [0.01; 0.35] 0.40 [0.12; 0.74] 0.20 [0.10; 0.33] 0.20 [0.11; 0.32] 0.29 [0.17; 0.43] 0.23 [0.17; 0.30]
G-CSF = Yes Katz Blazer Grose Tinchon Mahaseth Stein Random effects mode Heterogeneity: $I^2 = 49\%$, T^2 Test for subgroup difference df = 1 (p = 0.01)	$\tau^2 = 0.3928, p = 0.12$	0.14 [0.03; 0.35] 0.00 [0.00; 0.08] 0.03 [0.00; 0.12] 0.12 [0.06; 0.22] 0.08 [0.03; 0.17]

Supplementary Figure 3: Forest plots showing reported grade 3 or 4 adverse event rates in studies with and without G-CSF prophylaxis: neutropenia (p = 0. 01). *p*-value was calculated using a two-sided Q-test and a random effects model. G-CSF = granulocyte-colony stimulating factor. CI = confidence interval.

Study	Events Total	Proportion	95%-CI
G-CSF = No Christians Okada Khushman Peddi Moorcraft Random effects model Heterogeneity: $l^2 = 4\%$, τ^2		0.12 [0.05 [0.14 [0.00; 0.31] 0.04; 0.24] 0.01; 0.14] 0.06; 0.27] 0.06; 0.17]
G-CSF = Yes			
Katz	. 22		
Blazer	0 43	0.00 [0.00; 0.08]
Grose	2 65 — • — —	0.03 [0.00; 0.11]
Tinchon	. 12		
Mahaseth	. 60		
Stein	3 74		0.01; 0.11]
Random effects model		0.03 [0.01; 0.07]
Heterogeneity: $I^2 = 0\%$, τ^2	f = 0, p = 0.70	-	
Test for subgroup difference $df = 1$ ($n = 0.02$)			
df = 1 (<i>p</i> = 0.02)	0 0.05 0.1 0.15 0.2 0.25	0.3	

Supplementary Figure 4: Forest plots showing reported of grade 3 or 4 adverse event rates in studies with and without G-CSF prophylaxis: febrile neutropenia. (p = 0.02) p-value was calculated using a two-sided Q-test and a random effects model. G-CSF = granulocyte-colony stimulating factor. CI = confidence interval.



Supplementary Figure 5: (Neo)adjuvant (C)RT after neoadjuvant FOLFIRINOX and median OS of studies. Kaplan-Meier analysis of patient-level OS was used for estimation of median study OS, including only BRPC patients. Two studies are not shown in this figure as Addeo et al.[11] and Kim et al.[17] only included patients who underwent a resection. (p = 0.14). Linear regression analysis was performed. P-value was calculated using a two-sided F test. OS = overall survival. BRPC = borderline resectable pancreatic cancer.

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6. Yoo C, Kang J, Kim KP, *et al.* Efficacy and safety of neoadjuvant FOLFIRINOX for borderline resectable pancreatic adenocarcinoma: Improved efficacy compared with gemcitabine-based regimen. Oncotarget 2017;8(28):46337-46347.

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